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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/849,523			ing Date 20/2004	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
FOR NUMBER FILED					NUMBER EXTRA			RATE (\$)	FEE (\$)	Ī	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),		N/A		N/A			N/A			N/A	, 22 (4)	
	SEARCH FEE		N/A		N/A			N/A			N/A		
	(37 CFR 1.16(k). (i), (EXAMINATION FE	E	N/A		N/A			N/A		1	N/A		
	(37 CFR 1.16(o), (p), TAL CLAIMS	or (q))	21 minus 20 =		. 1			x \$ =		OR	X \$18 =	18	
	CFR 1.16(i)) EPENDENT CLAIM	s			<u> </u>					Ü.			
	CFR 1.16(h))		7 minus 3 =		• 4			x \$ =		Į	X \$86 =	344	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	is \$250 (\$125 for small additional 50 sheets o 35 U.S.C. 41(a)(1)(G)			pplication size fee due il entity) for each or fraction thereof. See and 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))  • If the difference in column 1 is less than zero, enter "0" in column 2.													
								TOTAL			TOTAL	362	
	APP	(Column 1)	AMENE	DED — Pa (Colum	OTHER THAN SMALL ENTITY OR SMALL ENTITY:								
AMENDMENT		CLAIMS	HI				1 [					-	
	03/16/2007	REMAINING AFTER AMENDMENT		PREVIO PAID FO	USLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 21	Minus	·· 21		= 0		x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	• 7	Minus	•••7		= 0		x \$ =		OR	X \$200=	0	
	Application Size Fee (37 CFR 1.16(s))												
Ì	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR			
al la								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
_//	0/0/	(Column 1)		(Colun		(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18(i))	•	Minus	**		=		X-\$" =		OR	x \$ =		
	Independent (37 CFR 1.18(h))	. >	Minus		$\sim$	Q		x \$ =		OR	x \$ =		
Ш И	Application Size Fee (37 CFR 1.16(s))											·	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									ØŔ			
										OR	TOTAL ADD'L FEE	-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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